



THE ALTERNATIVE TECHNOLOGIES IN TREATMENT OF UTERINE FIBROID

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THE USING OF ADHESION BARRIER INTERCEED® IN FUNCTIONAL UTERINE SURGERY

Introduction. Soldering disease of abdominal cavity is an often complication for organ preserved surgical treatment of fibroids. The most perspective and modern principle, providing the high preventive effect, is using of special means, dividing the wound surfaces in postoperative time. There are two kinds of antisol-dering barriers, which can be used in operative gynecology: self-dissolving membranes and liquid phases.

Objective of present research was the evaluation of effectiveness of self-dissolving barrier Interceed® (Gynecare) for myomectomy in patients with fibroids.

Material and methods. Membrane Interceed® (oxidized regenerated cellulose) of standard size was used for patients with fibroid after myomectomy in cases with plural localization of tumor (20 cases). It is known that this intervention has a high risk of forming postoperative solders. Myomectomy by laparoscopy was completed in 7 patients (35%); in 11 cases (55%) intervention was made by means of mini-laparotomy with laparoscopy assistance because of big size, atypical or

intramural localization of nodules. Low localization of large fibroid in 2 cases (10%) needed laparotomy operation. In several cases only a part of membrane was used. Ultrasound control was made on 3d, 5-th и 30-th days after intervention.

Results. During ultrasound control after intervention there were noticed that the membrane Interceed® was not found on 5-th day. In one case on the 6-th day after using Interceed® the patient was secondly intervened due to the suspicion of hematoma in pelvic cavity. Solders in pelvic cavity and in area of postoperative seams on the uterus were not found. The membrane was in the form of thin, transparent, netting pellicle.

Conclusions. Analyzing the received preliminary results and literary sources (Popov A.A., 2002) the using of adhesion barrier Interceed® should be consider as the safe and effective mean for soldering prevention in uterine reconstructive-plastic interventions in women of reproductive age with unrealized fertility.

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OPTIMIZATION OF LAPAROSCOPIC HYSTERECTOMY METHOD IN FIBROIDS SURGERY

Introduction. Hysterectomy is still the most often intervention in gynecology up to present day (Adamyan L.V. et al., 2000). The most often intervention all over the world after appendectomy is hysterectomy (Wattiez A., et al. 2003). Moreover hysterectomy is the most often performed gynecology intervention. In our days the majority of hysterectomies demanding laparotomy can be partly or fully performed by laparoscopic way (Kulakov V.I. et al., 2000).

Objective of present research is optimization of lap-

aroscopic hysterectomy method in surgical treatment of patients with fibroids.

Material and methods. During the period from November 2004 to May 2005, 55 hysterectomies using laparoscopy were performed in department of surgical gynecology of the D.O.Ott Research Institution of Obstetrics and Gynecology RAMS.

Results. There were performed: 34 operations (61,8%) – total laparoscopic hysterectomy (TLH), 4 operations (7,3%) – laparoscopic subtotal hysterecto-